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 UNITED STATES PATENT AND TRADEMARK OFFICE
 WASHINGTON, D.C. 20231
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Bib Data Sheet

CONFIRMATION NO. 5569

SERIAL NUMBER 09/848,052	FILING DATE 05/03/2001 RULE	CLASS 712	GROUP ART UNIT 2183	ATTORNEY DOCKET NO. 41874/RRT/T442
APPLICANTS Masoud Motamed, Woodland Hills, CA; Robert Blakely, Garden Grove, CA; Khaled Dessouky, Studio City, CA; Mario Proietti, Fullerton, CA;				
** CONTINUING DATA ***** THIS APPLN CLAIMS BENEFIT OF 60/202,147 05/05/2000				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 06/22/2001		** SMALL ENTITY **		
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature Initials		STATE OR COUNTRY CA	SHEETS DRAWING 15	TOTAL CLAIMS 31
ADDRESS 23363				
TITLE System and method for wireless location coverage and prediction				
FILING FEE RECEIVED 454	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		

Jones, H
2128
RR



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CONFIRMATION NO. 5569

SERIAL NUMBER 09/848,052	FILING DATE 05/03/2001 RULE	CLASS 742-703	GROUP ART UNIT 2183-2128	ATTORNEY DOCKET NO. 41874/RR/T442
APPLICANTS Masoud Motamed, Woodland Hills, CA; Robert Blakely, Garden Grove, CA; Khaled Dessouky, Studio City, CA; Mario Proietti, Fullerton, CA;				
** CONTINUING DATA ***** THIS APPLN CLAIMS BENEFIT OF 60/202,147 05/05/2000 <i>true 7/1</i>				
** FOREIGN APPLICATIONS ***** <i>none 7/1</i>				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 06/22/2001		** SMALL ENTITY **		
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____		STATE OR COUNTRY CA	SHEETS DRAWING 15	TOTAL CLAIMS 31
ADDRESS 23363				
TITLE System and method for wireless location coverage and prediction				
FILING FEE RECEIVED 454	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		